

Underreporting of Cases During the COVID-19 Pandemic: A Worrying Warning for Africa

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ABSTRACT

In this manuscript, we discuss the current epidemiological scenario of coronavirus disease 2019 (COVID-19) in Africa, its implications, as well as propose recommendations.

Keywords: pandemics, COVID-19, Africa, public health surveillance, epidemiology

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Dear Editor,

According to the World Health Organization (WHO), there is a severe underestimation of Coronavirus disease 2019 (COVID-19) cases in Africa [1]. A recent assessment shows that only one in seven cases of COVID-19 (14.2% of the total) have been reported in the region. The possible cause for this problem has probably been the low number of COVID-19 tests performed, mostly including patients with overt clinical symptoms and international travelers.

It is estimated that about 59 million Africans were affected by the severe acute respiratory syndrome Coronavirus 2 (SARS-CoV-2); however, there are only 8.5 million officially reported cases. So far, a total of 70 million COVID-19 tests were carried out on a population of 1.3 billion, which highlights the significant gap in reported cases. In response to this, WHO has focused on increasing COVID-19 testing capacity. The countries included are Burundi, Cote d'Ivoire, the Democratic Republic of the Congo, Guinea-Bissau, Mozambique, Republic of Congo, Senegal, and Zambia [1].

Monitoring the COVID-19 pandemic's impact in Africa has been a considerable challenge, owing to relatively weak health services that cannot execute containment tactics and lack of data to track the situation [2, 3]. However, even if we had more data on monitoring the epidemic across the continent over time, the overall repercussions are now clearly anticipated without the need for additional modeling studies [1]. Furthermore, because the pandemic degrades the global economy, an increase in absolute poverty is expected, putting the Sustainable Development Goals (SDGs) in jeopardy with catastrophic

consequences for the African continent [4]. The flowchart shown in **Figure 1** summarizes the consequences of underreporting.

In the current situation, all stakeholders must work together to devise measures for limiting the scope of the current extended emergency without jeopardizing the delivery of primary health care. Strengthening the health system might boost the availability of reliable data and contribute more effectively to combat the pandemic's severe repercussions. More than ever, practical assistance and strong partnership across international organizations are required.

Moreover, given the potential severity of the disease [5-7], the circulation of SARS-CoV-2 variants, and the low vaccination rates against COVID-19 across the African territory [8], it is imminent that governments and health authorities strengthen local surveillance actions [9]. Increased funding towards COVID-19 screening centers may further guarantee access to appropriate treatment and preventative health services in response to the high-cost supplies for the management of severe cases [10, 11]. Further research is warranted in understanding the socio-geographical factors and the role of public hesitancy to accessing healthcare, which may negatively influence COVID-19 detection and vaccination rates in the region.

In this context, the underestimated burden of long-lasting COVID-19 sequelae and complications requires extensive efforts in restructuring the allocated funding, resources and infrastructure for the African health system [12, 13]. Failure to mitigate this hidden crisis can derail the path to global recovery and sustainability of the continent. Through international collaborations, funding support, and research focused on efficient reporting of cases, this public health challenge can

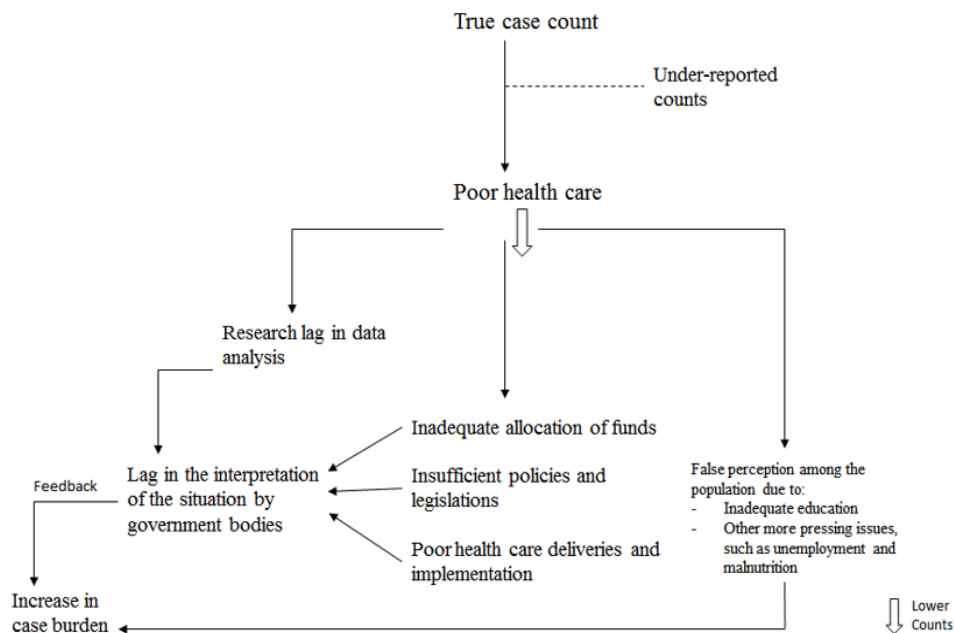


Figure 1. Schematic representation of the consequences of the underreporting of COVID-19 cases in Africa (cause and effect analysis)

serve as an evidence-based incubator for innovation during the pandemic.

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